### STATE OF NEW HAMPSHIRE

# 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

JUL 25 2018

				1
I. Name of Lobbyis	st(s) Dr. Carl N	1. Ladd		NEW HAMPSHIRE
II. Name of lobbyis	DEPARTMENT OF STATE			
New Hampshire	School Administ	rators Association (N	NHSAA)	
	lame of partnership, f		····	
46 Donovan Stre	et, Suite 3	Concord	NH	03301
Business Address: (	Street)	(Town/City)	(State)	(Zip Code)
(603) 225-3230		(603) 225-3225	e-mail carl@nt	nsaa.org
(Telephone	)	(Fax		
		ne – file separate repo h are not attributable	orts for each client, OR you m	ay file a separate report for
√ All reportable tr	ansactions occurrin	g in the months prior to	the reporting date relative to t	he following client:
	(Full Name of CI	ient as it appears on the L	obbyist Registration Form)	
<u>OR</u>				
All reportable tra unrelated to any part		obyist (including the lo	bbyist's family), or the lobbying	g firm listed below which are
IV. Date of Report	April 25, 2018		July 25, 2018 🗘	
	tivity from date of reg		activity from 4/1/18 to 6/30/1	8
	October 31, 20 activity from 7/1/1		January 30, 2019	1/10
	activity from 77171	0 10 7/50/10	uctivity from 10/1/16 to 12/3	1/10
	d, complete just this	-	e transactions made since he Secretary of State's Office,	-
VI. Check if addition	onal reports are at	tached:		
✓ If you have rece	ived fees or made e	xpenditures, you must	file Addendum A- Fees and E	Expenses
☐ If you have paid Expense Reimburses		reimbursed expenses, ye	ou must file <b>Addendum B</b> - Re	eport of Honorariums or
☐ If you, your firm	n, or your family ha	s made political contrib	outions, you must file Addend	um C- Political Contributions
Sworn Statement/A I have read RSA 15, and complete to the (Signature of lobby) Carl M. Ladd	RSA 15-B, RSA/1	9-C and RSA 664 and h	nereby swear or affirm that the $\frac{7/23/18}{\text{(Date)}}$	foregoing information is true
(Print Name of lobb	yist)			

# LEASE PRINT

### STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Carl M. Ladd					
11. Name of lobbyist's partnership, firm or corporation, if any:					
(Name of partnership, firm or corporation)					
III. Name of Client NH School Administrators Association (NHSAA)	Date07-23-18				
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services				
a) Total of all fees received in this reporting period	a) \$4,743.00				
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$4,743.00				
c) Total of all fees received to date (Add lines a and b)	c) S9,486.00				
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$				
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm Expenses are to be reported in one of three categories of expenses:  (a) the aggregate total of all expenses paic during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 fo any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50 restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.					
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$				
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) S				

c) \$ \_\_\_\_\_

c) Total of all itemized expenditures reported in detail in section VI.

d) Total expenses for this reporting period (Add lines a, b and c)	d) S
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	s
	\$
	\$
	S
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
/ rel M. Prest	07-23-18
(Signature of lobbyist)	(Datc)
Carl M. Ladd	
(Print Name of lobbyist)	

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

	affirmation by Lobb ne and Expenses for:	•		
Name of Lobbying pa	rtnership, firm, or corpo	oration:		
Name of Client (leave	blank if Statement is for	or the partnership, firm, or	corporation and not related to	any
particular client): Ne	w Hampshire School	Administrators Associatio	n (NHSAA)	
Date of Report (check	one):			
April 25, 2018 □	July 25, 2018	October 31, 2018 🗆	January 30, 2019 🗆	
			nd Expenses described above, umber of Addendum forms b	
Addendum A(	s).			
Addendum B(	s).			
Addendum C(	s).			
• / \	rm that the foregoing in fine knowledge and be		nt and each Addendum is true  07-23-18  (Date)	: and
Carl M. Ladd				
(Print Name of lobbyi	st)			